Cortez



REQUEST FOR WAIVER - RESTRICTIONS ON PUBLIC BENEFITS

APPLICANT						
Current Name - Last	First			Middle		
Full Maiden Name, if applicable	1		-			
Birth Date	Gender			Social Security Number		
Current Residence Address - Street		City		State	ZIP Code	
U. S. Citizen? Yes No			If No, Lawfully Presen	_	1	
Applicant's Signature					Date	
Form(s) of Identification						
IF AN APPLICANT IS UNABLE TO PRODUCE THE DOCUMENTATION NECESSARY TO OBTAIN A COLORADO DRIVER'S LICENSE OR IDENTIFICATION CARD, THE APPLICANT SHALL PROVIDE ANY AVAILABLE DOCUMENTS THAT VERIFY NAME AND PROOF OF LAWFUL PRESENCE.						
REPRESENTATIVE DESIGNATION (IF APPLICABLE)						
APPLICANTS LACKING SUFFICIENT MENTAL OR PHYSICAL ABILITY TO EITHER SIGN THIS FORM OR APPEAR IN PERSON TO SUBMIT THE FORM MAY ACT THROUGH A DESIGNATED REPRESENTATIVE.						
DESIGNATED REPRESENTATIVE						
Name - Last	First			Middle		
Form(s) of Identification Identifi			Identification Number	tification Number		
Applicant's specific reason for needing a designated representative						
<u> </u>						
APPLICANT'S DESIGNATED REPRESENTATIVE MUST SIGN BELOW						
Signature					Date	
THIS FORM AND ALL SUPPORTING DOCUMENTATION MUST BE PRESENTED IN PERSON AT ONE OF THE FOLLOWING DRIVER'S LICENSE OFFICES:						

Steamboat Springs Alamosa Craig **Hot Sulphur Springs** Meeker Denver (Athmar) Delta **Grand Junction** Montrose **Sterling** Trinidad Aurora Greeley Durango Northglenn **Boulder** Ft. Collins Gunnison **Parker** Walsenburg **Canon City** Ft. Morgan La Junta **Pueblo Colorado Springs** Frisco Lamar Rangely

Longmont

Salida

Glenwood Springs